Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number 17-40881 (If known)

FILED
U.S. BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS
2017 MAY 16 PM 2:04
CLERK, U.S. BANKRUPTCY COURT
BY________DEPUTY CLERK

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. *Schedule A/B: Property* (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from *Schedule A/B*	$ 0
1b. Copy line 62, Total personal property, from *Schedule A/B*	$ 1150
1c. Copy line 63, Total of all property on *Schedule A/B*	$ 1150

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)	
2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D*	$ 0
3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*	$ 111,063
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*	+ $ 69,052
Your total liabilities	$ 180,115

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I) Copy your combined monthly income from line 12 of *Schedule I*	$ 600
5. *Schedule J: Your Expenses* (Official Form 106J) Copy your monthly expenses from line 22c of *Schedule J*	$ 6,603

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. **What kind of debt do you have?**

☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the *Statement of Your Current Monthly Income***: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. $ 5053

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

From Part 4 on *Schedule E/F*, copy the following:

	Total claim
9a. Domestic support obligations (Copy line 6a.)	$ 0
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	$ 111,063
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	$ 0
9d. Student loans. (Copy line 6f.)	$ 0
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	$ 0
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ $ 0
9g. **Total.** Add lines 9a through 9f.	$ 111,063

Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number 17-40881
(If known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person____________________. Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x Cantres Clark
Signature of Debtor 1

Date 5 16 2017
MM / DD / YYYY

x ____________________
Signature of Debtor 2

Date __________
MM / DD / YYYY

Fill in this information to identify your case and this filing:

Debtor 1: Cantres LaNae Clark
First Name / Middle Name / Last Name

Debtor 2 (Spouse, if filing): ______
First Name / Middle Name / Last Name

United States Bankruptcy Court for the: Eastern District of Texas (State)

Case number 17-40881

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. **Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

■ No. Go to Part 2.
☐ Yes. Where is the property?

1.1. ______
Street address, if available, or other description

______

City ______ State ______ ZIP Code ______

County ______

What is the property? Check all that apply.
☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other ______

Who has an interest in the property? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: ______

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $______
Current value of the portion you own? $______

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
______

☐ **Check if this is community property** (see instructions)

If you own or have more than one, list here:

1.2. ______
Street address, if available, or other description

______

City ______ State ______ ZIP Code ______

County ______

What is the property? Check all that apply.
☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other ______

Who has an interest in the property? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: ______

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property? $______
Current value of the portion you own? $______

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
______

☐ **Check if this is community property** (see instructions)

Debtor 1 Cantres LaNae Clark Case number (if known) 17-40881
First Name Middle Name Last Name

1.3. ______________________
Street address, if available, or other description

____

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other ______________

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: ______________

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$	$

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

____

☐ **Check if this is community property** (see instructions)

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.** .... ➔ $ 0

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases.*

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No
- ■ Yes

3.1. Make: Jaguar
Model: Xd
Year: 2011
Approximate mileage: 65,000
Other information:

Who has an interest in the property? Check one.

- ■ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$ 16,500	0

If you own or have more than one, describe here:

3.2. Make: ______
Model: ______
Year: ______
Approximate mileage: ______
Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	**Current value of the portion you own?**
$	$

Debtor 1 Cantres LaNae Clark Case number (if known) 17-40881
First Name Middle Name Last Name

3.3. Make: ____
Model: ____
Year: ____
Approximate mileage: ____
Other information:

Who has an interest in the property? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	Current value of the portion you own?
$	$

3.4. Make: ____
Model: ____
Year: ____
Approximate mileage: ____
Other information:

Who has an interest in the property? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	Current value of the portion you own?
$	$

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ■ No
- ☐ Yes

4.1. Make: ____
Model: ____
Year: ____
Other information:

Who has an interest in the property? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	Current value of the portion you own?
$	$

If you own or have more than one, list here:

4.2. Make: ____
Model: ____
Year: ____
Other information:

Who has an interest in the property? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property.*

Current value of the entire property?	Current value of the portion you own?
$	$

5. **Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here** .... → $ 0

Debtor 1 Cantres LaNae Clark — Case number (if known) 17-40881
First Name Middle Name Last Name

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**
   Examples: Major appliances, furniture, linens, china, kitchenware
   - ■ No
   - ☐ Yes. Describe......... $

7. **Electronics**
   Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games
   - ☐ No
   - ■ Yes. Describe.......... TV's, computers, cellphones — $ 400

8. **Collectibles of value**
   Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles
   - ■ No
   - ☐ Yes. Describe.......... $

9. **Equipment for sports and hobbies**
   Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments
   - ☐ No
   - ■ Yes. Describe.......... Bicycles, Football) — $ 100

10. **Firearms**
    Examples: Pistols, rifles, shotguns, ammunition, and related equipment
    - ■ No
    - ☐ Yes. Describe.......... $

11. **Clothes**
    Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories
    - ☐ No
    - ■ Yes. Describe.......... Shoes, Clothes — $ 300

12. **Jewelry**
    Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver
    - ☐ No
    - ■ Yes. Describe.......... Rings — $ 200

13. **Non-farm animals**
    Examples: Dogs, cats, birds, horses
    - ■ No
    - ☐ Yes. Describe.......... $

14. **Any other personal and household items you did not already list, including any health aids you did not list**
    - ■ No
    - ☐ Yes. Give specific information.............. $

15. **Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** .... → $ 1000

Debtor 1 Cantres LaNae Clark — Case number (if known) 17-40881
First Name Middle Name Last Name

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. **Cash**
Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☐ No
- ■ Yes .... Jar of Pennies .... Cash: .... $ 150

17. **Deposits of money**
Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ■ No
- ☐ Yes .... Institution name:

	Institution name	
17.1. Checking account:		$
17.2. Checking account:		$
17.3. Savings account:		$
17.4. Savings account:		$
17.5. Certificates of deposit:		$
17.6. Other financial account:		$
17.7. Other financial account:		$
17.8. Other financial account:		$
17.9. Other financial account:		$

18. **Bonds, mutual funds, or publicly traded stocks**
Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ■ No
- ☐ Yes .... Institution or issuer name:

Institution or issuer name	
	$
	$
	$

19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- ■ No
- ☐ Yes. Give specific information about them. ....

Name of entity:	% of ownership:	
	%	$
	%	$
	%	$

Debtor 1 Cantres LaNae Clark (First Name, Middle Name, Last Name) Case number (if known) 17-40881

20. **Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- [x] No
- [ ] Yes. Give specific information about them. Issuer name:

Issuer name	Value
	$
	$
	$

21. **Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- [x] No
- [ ] Yes. List each account separately..

Type of account:	Institution name:	Value
401(k) or similar plan:		$
Pension plan:		$
IRA:		$
Retirement account:		$
Keogh:		$
Additional account:		$
Additional account:		$

22. **Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- [x] No
- [ ] Yes

	Institution name or individual:	Value
Electric:		$
Gas:		$
Heating oil:		$
Security deposit on rental unit:		$
Prepaid rent:		$
Telephone:		$
Water:		$
Rented furniture:		$
Other:		$

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

- [x] No
- [ ] Yes. Issuer name and description:

Issuer name and description	Value
	$
	$
	$

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ■ No
- ☐ Yes .... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

$\$$____
$\$$____
$\$$____

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ■ No
- ☐ Yes. Give specific information about them... $____

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ■ No
- ☐ Yes. Give specific information about them... $____

27. **Licenses, franchises, and other general intangibles**
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ■ No
- ☐ Yes. Give specific information about them... $____

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

- ■ No
- ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

Federal: $____
State: $____
Local: $____

29. **Family support**
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ■ No
- ☐ Yes. Give specific information. ....

Alimony: $____
Maintenance: $____
Support: $____
Divorce settlement: $____
Property settlement: $____

30. **Other amounts someone owes you**
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ■ No
- ☐ Yes. Give specific information. .... $____

Debtor 1 Cantres LaNae Clark — First Name, Middle Name, Last Name — Case number (if known) 17-40881

31. **Interests in insurance policies**
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- [x] No
- [ ] Yes. Name the insurance company of each policy and list its value. ...

Company name:	Beneficiary:	Surrender or refund value:
		$
		$
		$

32. **Any interest in property that is due you from someone who has died**
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- [x] No
- [ ] Yes. Give specific information. .... $

33. **Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**
Examples: Accidents, employment disputes, insurance claims, or rights to sue

- [x] No
- [ ] Yes. Describe each claim. .... $

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- [x] No
- [ ] Yes. Describe each claim. .... $

35. **Any financial assets you did not already list**

- [x] No
- [ ] Yes. Give specific information. .... $

36. **Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** .... → $150

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. **Do you own or have any legal or equitable interest in any business-related property?**

- [x] No. Go to Part 6.
- [ ] Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. **Accounts receivable or commissions you already earned**

- [ ] No
- [ ] Yes. Describe....... $

39. **Office equipment, furnishings, and supplies**
Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- [ ] No
- [ ] Yes. Describe....... $

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- ☐ No
- ☐ Yes. Describe....... $

41. **Inventory**

- ☐ No
- ☐ Yes. Describe....... $

42. **Interests in partnerships or joint ventures**

- ☐ No
- ☐ Yes. Describe....... Name of entity: % of ownership:

Name of entity	% of ownership	
	%	$
	%	$
	%	$

43. **Customer lists, mailing lists, or other compilations**

- ☐ No
- ☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?
  - ☐ No
  - ☐ Yes. Describe......... $

44. **Any business-related property you did not already list**

- ☐ No
- ☐ Yes. Give specific information ....

	$
	$
	$
	$
	$
	$

45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** .... → $ 0

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ■ No. Go to Part 7.
- ☐ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

- ☐ No
- ☐ Yes........................ $

Debtor 1 Cantres LaNae Clark Case number (if known) 17-40881
First Name Middle Name Last Name

48. Crops—either growing or harvested

- ☐ No
- ☐ Yes. Give specific information. $

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☐ No
- ☐ Yes $

50. Farm and fishing supplies, chemicals, and feed

- ☐ No
- ☐ Yes $

51. Any farm- and commercial fishing-related property you did not already list

- ☐ No
- ☐ Yes. Give specific information. $

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here → $ 0

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?
Examples: Season tickets, country club membership

- ☒ No
- ☐ Yes. Give specific information. $ $ $

54. Add the dollar value of all of your entries from Part 7. Write that number here → $ 0

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 → $ 0

56. Part 2: Total vehicles, line 5 $ 0

57. Part 3: Total personal and household items, line 15 $ 1000

58. Part 4: Total financial assets, line 36 $ 150

59. Part 5: Total business-related property, line 45 $ 0

60. Part 6: Total farm- and fishing-related property, line 52 $ 0

61. Part 7: Total other property not listed, line 54 + $ 0

62. Total personal property. Add lines 56 through 61. $ 1150 Copy personal property total → + $ 1150

63. Total of all property on Schedule A/B. Add line 55 + line 62. $ 1150

Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Texas

Case number 17-40881
(If known)

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** *Check one only, even if your spouse is filing with you.*
   - ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
   - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on *Schedule A/B* that lists this property	**Current value of the portion you own** Copy the value from *Schedule A/B*	**Amount of the exemption you claim** *Check only one box for each exemption.*	**Specific laws that allow exemption**
Brief description: ______ Line from *Schedule A/B:* ____	$______	☐ $______ ☐ 100% of fair market value, up to any applicable statutory limit	______
Brief description: ______ Line from *Schedule A/B:* ____	$______	☐ $______ ☐ 100% of fair market value, up to any applicable statutory limit	______
Brief description: ______ Line from *Schedule A/B:* ____	$______	☐ $______ ☐ 100% of fair market value, up to any applicable statutory limit	______

3. **Are you claiming a homestead exemption of more than $160,375?**
   (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
   - ☐ No
   - ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
     - ☐ No
     - ☐ Yes

Debtor 1 Cantres LaNae Clark (First Name, Middle Name, Last Name) Case number (if known) 17-40881

Part 2: Additional Page

Brief description of the property and line on *Schedule A/B* that lists this property	Current value of the portion you own Copy the value from *Schedule A/B*	Amount of the exemption you claim *Check only one box for each exemption*	Specific laws that allow exemption
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____
Brief description: ____ Line from *Schedule A/B*: ____	$____	☐ $____ ☐ 100% of fair market value, up to any applicable statutory limit	____

Fill in this information to identify your case:

Debtor 1: Cantres LaVae Clark (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): First Name / Middle Name / Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number (If known): 17-40881

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. **Do any creditors have claims secured by your property?**
   - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
   - ■ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. **List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A **Amount of claim** Do not deduct the value of collateral. | *Column B* **Value of collateral that supports this claim** | *Column C* **Unsecured portion** If any

2.1 EECU (Creditor's Name)
PO Box 1777 (Number Street)
Fort Worth TX 76101 (City State ZIP Code)

Describe the property that secures the claim: Car

Column A: $20,969 | Column B: $16,500 | Column C: $

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ■ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ________

Date debt was incurred ________ **Last 4 digits of account number** 1 2 8 1

2.2 ________ (Creditor's Name)
________ (Number Street)
________ (City State ZIP Code)

Describe the property that secures the claim: ________

Column A: $________ | Column B: $________ | Column C: $________

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ________

Date debt was incurred ________ **Last 4 digits of account number** ___ ___ ___ ___

Add the dollar value of your entries in Column A on this page. Write that number here: $20,969

Debtor 1 Cantres LaNae Clark (First Name, Middle Name, Last Name) Case number (if known) 17-40881

Part 1: Additional Page
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A **Amount of claim** Do not deduct the value of collateral. | *Column B* **Value of collateral that supports this claim** | *Column C* **Unsecured portion** If any

---

Creditor's Name ______

Number Street ______

City State ZIP Code ______

Describe the property that secures the claim: $______ $______ $______

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ______

Date debt was incurred ______ **Last 4 digits of account number** ___ ___ ___ ___

Creditor's Name ______

Number Street ______

City State ZIP Code ______

Describe the property that secures the claim: $______ $______ $______

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ______

Date debt was incurred ______ **Last 4 digits of account number** ___ ___ ___ ___

Creditor's Name ______

Number Street ______

City State ZIP Code ______

Describe the property that secures the claim: $______ $______ $______

As of the date you file, the claim is: Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Who owes the debt? Check one.
- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ **Check if this claim relates to a community debt**

Nature of lien. Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) ______

Date debt was incurred ______ **Last 4 digits of account number** ___ ___ ___ ___

Add the dollar value of your entries in Column A on this page. Write that number here: $20,969

If this is the last page of your form, add the dollar value totals from all pages. Write that number here: $20,969

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ Name
Number Street
City State ZIP Code
On which line in Part 1 did you enter the creditor? ____
Last 4 digits of account number ___ ___ ___ ___

☐ Name
Number Street
City State ZIP Code
On which line in Part 1 did you enter the creditor? ____
Last 4 digits of account number ___ ___ ___ ___

☐ Name
Number Street
City State ZIP Code
On which line in Part 1 did you enter the creditor? ____
Last 4 digits of account number ___ ___ ___ ___

☐ Name
Number Street
City State ZIP Code
On which line in Part 1 did you enter the creditor? ____
Last 4 digits of account number ___ ___ ___ ___

☐ Name
Number Street
City State ZIP Code
On which line in Part 1 did you enter the creditor? ____
Last 4 digits of account number ___ ___ ___ ___

☐ Name
Number Street
City State ZIP Code
On which line in Part 1 did you enter the creditor? ____
Last 4 digits of account number ___ ___ ___ ___

Fill in this information to identify your case:

Debtor 1: Cantres LaNae Clark (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): First Name / Middle Name / Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number (If known): 17-40881

❑ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims against you?**
   - ❑ No. Go to Part 2.
   - ☒ Yes.
2. **List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

   (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim | Priority amount | Nonpriority amount

2.1 IRS (Priority Creditor's Name)

4050 Alpha Rd (Number Street)

Farmers Branch TX 75247 (City State ZIP Code)

Last 4 digits of account number 6935 — Total claim $180,115 — Priority amount $111,063 — Nonpriority amount $69,052

When was the debt incurred? 05 to 15

As of the date you file, the claim is: Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Who incurred the debt? Check one.
- ☒ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another
- ❑ **Check if this claim is for a community debt**

Type of PRIORITY unsecured claim:
- ❑ Domestic support obligations
- ☒ Taxes and certain other debts you owe the government
- ❑ Claims for death or personal injury while you were intoxicated
- ❑ Other. Specify ______

Is the claim subject to offset?
- ☒ No
- ❑ Yes

2.2 ______ Priority Creditor's Name

______ Number Street

______ City State ZIP Code

Last 4 digits of account number ___ ___ ___ ___ $______ $______ $______

When was the debt incurred? ______

As of the date you file, the claim is: Check all that apply.
- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Who incurred the debt? Check one.
- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another
- ❑ **Check if this claim is for a community debt**

Type of PRIORITY unsecured claim:
- ❑ Domestic support obligations
- ❑ Taxes and certain other debts you owe the government
- ❑ Claims for death or personal injury while you were intoxicated
- ❑ Other. Specify ______

Is the claim subject to offset?
- ❑ No
- ❑ Yes

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. **Total claim** **Priority amount** **Nonpriority amount**

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ❑ No
- ❑ Yes

Last 4 digits of account number ___ ___ ___ ___ $____ $____ $____

When was the debt incurred? ________

As of the date you file, the claim is: Check all that apply.

- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Type of PRIORITY unsecured claim:

- ❑ Domestic support obligations
- ❑ Taxes and certain other debts you owe the government
- ❑ Claims for death or personal injury while you were intoxicated
- ❑ Other. Specify ________

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ❑ No
- ❑ Yes

Last 4 digits of account number ___ ___ ___ ___ $____ $____ $____

When was the debt incurred? ________

As of the date you file, the claim is: Check all that apply.

- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Type of PRIORITY unsecured claim:

- ❑ Domestic support obligations
- ❑ Taxes and certain other debts you owe the government
- ❑ Claims for death or personal injury while you were intoxicated
- ❑ Other. Specify ________

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ❑ Debtor 1 only
- ❑ Debtor 2 only
- ❑ Debtor 1 and Debtor 2 only
- ❑ At least one of the debtors and another

❑ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ❑ No
- ❑ Yes

Last 4 digits of account number ___ ___ ___ ___ $____ $____ $____

When was the debt incurred? ________

As of the date you file, the claim is: Check all that apply.

- ❑ Contingent
- ❑ Unliquidated
- ❑ Disputed

Type of PRIORITY unsecured claim:

- ❑ Domestic support obligations
- ❑ Taxes and certain other debts you owe the government
- ❑ Claims for death or personal injury while you were intoxicated
- ❑ Other. Specify ________

Debtor 1 Cantres LaNae Clark Case number (if known) 17-40881
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. **Do any creditors have nonpriority unsecured claims against you?**

- [ ] No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- [x] Yes

4. **List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1 IRS
Nonpriority Creditor's Name
4050 Alpha Rd
Number Street
Farmers Branch TX 75244
City State ZIP Code

Last 4 digits of account number 6935
When was the debt incurred? Before 2012
$69,052

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Who incurred the debt? Check one.

- [x] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [x] No
- [ ] Yes

Type of NONPRIORITY unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [x] Other. Specify Income Taxes Before 2012

4.2 ____________________
Nonpriority Creditor's Name
____
Number Street
____
City State ZIP Code

Last 4 digits of account number ___ ___ ___ ___
When was the debt incurred? ________
$________

As of the date you file, the claim is: Check all that apply

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Who incurred the debt? Check one.

- [ ] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [ ] No
- [ ] Yes

Type of NONPRIORITY unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [ ] Other. Specify ____________________

4.3 ____________________
Nonpriority Creditor's Name
____
Number Street
____
City State ZIP Code

Last 4 digits of account number ___ ___ ___ ___
When was the debt incurred? ________
$________

As of the date you file, the claim is: Check all that apply.

- [ ] Contingent
- [ ] Unliquidated
- [ ] Disputed

Who incurred the debt? Check one.

- [ ] Debtor 1 only
- [ ] Debtor 2 only
- [ ] Debtor 1 and Debtor 2 only
- [ ] At least one of the debtors and another

- [ ] **Check if this claim is for a community debt**

Is the claim subject to offset?

- [ ] No
- [ ] Yes

Type of NONPRIORITY unsecured claim:

- [ ] Student loans
- [ ] Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- [ ] Debts to pension or profit-sharing plans, and other similar debts
- [ ] Other. Specify ____________________

Debtor 1 Cantres Lanae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total claim**

☐

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Last 4 digits of account number ___ ___ ___ ___ $________

When was the debt incurred? ________

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of **NONPRIORITY** unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify________

☐

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Last 4 digits of account number ___ ___ ___ ___ $________

When was the debt incurred? ________

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of **NONPRIORITY** unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify________

☐

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☐ No
- ☐ Yes

$________

Last 4 digits of account number ___ ___ ___ ___

When was the debt incurred? ________

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of **NONPRIORITY** unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☐ Other. Specify________

Debtor 1 Cantres LaNae Clark Case number (if known) 17-40881
First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number ___ ___ ___ ___

Name
Number Street
City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?
Line _____ of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number ___ ___ ___ ___

Debtor 1 ______ First Name Middle Name Last Name Case number (if known)______

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. **Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.**

			Total claim
Total claims from Part 1	6a. **Domestic support obligations**	6a.	$ 0
	6b. **Taxes and certain other debts you owe the government**	6b.	$ 111,063
	6c. **Claims for death or personal injury while you were intoxicated**	6c.	$ 0
	6d. **Other.** Add all other priority unsecured claims. Write that amount here.	6d.	+ $ 0
	6e. **Total.** Add lines 6a through 6d.	6e.	$ 111,063

			Total claim
Total claims from Part 2	6f. **Student loans**	6f.	$ 0
	6g. **Obligations arising out of a separation agreement or divorce that you did not report as priority claims**	6g.	$ 0
	6h. **Debts to pension or profit-sharing plans, and other similar debts**	6h.	$ 0
	6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ $ 69,052
	6j. **Total.** Add lines 6f through 6i.	6j.	$ 69,052

Fill in this information to identify your case:

Debtor Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number 17-40881
(If known)

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. **Do you have any executory contracts or unexpired leases?**
   ■ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
   ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. **List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	Name Number Street City State ZIP Code	
2.2	Name Number Street City State ZIP Code	
2.3	Name Number Street City State ZIP Code	
2.4	Name Number Street City State ZIP Code	
2.5	Name Number Street City State ZIP Code	

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease	What the contract or lease is for
2._ Name / Number Street / City State ZIP Code	
2._ Name / Number Street / City State ZIP Code	
2._ Name / Number Street / City State ZIP Code	
2._ Name / Number Street / City State ZIP Code	
2._ Name / Number Street / City State ZIP Code	
2._ Name / Number Street / City State ZIP Code	
2._ Name / Number Street / City State ZIP Code	
2._ Name / Number Street / City State ZIP Code	

Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number 17-40881
(If known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)
   - ☒ No
   - ☐ Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
   - ☐ No. Go to line 3.
   - ☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
     - ☐ No
     - ☒ Yes. In which community state or territory did you live? Texas. Fill in the name and current address of that person.

       Rodger Clark
       Name of your spouse, former spouse, or legal equivalent

       8200 Sonnet Drive
       Number Street

       McKinney TX 75071
       City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D, Schedule E/F, or Schedule G* to fill out Column 2.**

	Column 1: Your codebtor	*Column 2:* The creditor to whom you owe the debt Check all schedules that apply:
3.1	Rodger Clark (Name) 8200 Sonnet Drive (Number Street) McKinney TX 75071 (City State ZIP Code)	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3.2	Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3.3	Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______

Debtor 1 Cantres LaNae Clark — First Name / Middle Name / Last Name

Case number (if known) 17-40881

Additional Page to List More Codebtors

Column 1: Your codebtor	*Column 2:* The creditor to whom you owe the debt Check all schedules that apply:
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______
3._ Name Number Street City State ZIP Code	☐ Schedule D, line ______ ☐ Schedule E/F, line ______ ☐ Schedule G, line ______

Fill in this information to identify your case:

Debtor 1: Cantres (First Name) LaNae (Middle Name) Clark (Last Name)

Debtor 2 (Spouse, if filing): First Name ______ Middle Name ______ Last Name ______

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number (If known): 17-40881

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	☒ Employed ☐ Not employed	☐ Employed ☐ Not employed
Occupation	Insurance	
Employer's name	Primerica	
Employer's address	5900 South Lake Forest (Number Street) Mckinney TX 75070 City State ZIP Code	Number Street City State ZIP Code
How long employed there?	3 months	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write $0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

		For Debtor 1	For Debtor 2 or non-filing spouse
2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	$ 600	$
3. **Estimate and list monthly overtime pay.**	3.	+ $	+ $
4. **Calculate gross income.** Add line 2 + line 3.	4.	$ 600	$

Debtor 1 Cantres LaNae Clark (First Name, Middle Name, Last Name) Case number (if known) 17-40881

			For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.		$ 600	$
5. **List all payroll deductions:**				
5a. **Tax, Medicare, and Social Security deductions**	5a.		$ 0	$
5b. **Mandatory contributions for retirement plans**	5b.		$ 0	$
5c. **Voluntary contributions for retirement plans**	5c.		$ 0	$
5d. **Required repayments of retirement fund loans**	5d.		$ 0	$
5e. **Insurance**	5e.		$ 0	$
5f. **Domestic support obligations**	5f.		$ 0	$
5g. **Union dues**	5g.		$ 0	$
5h. **Other deductions.** Specify: ____	5h.	+	$ 0	+ $
6. **Add the payroll deductions.** Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.		$ 0	$
7. **Calculate total monthly take-home pay.** Subtract line 6 from line 4.	7.		$ 600	$
8. **List all other income regularly received:**				
8a. **Net income from rental property and from operating a business, profession, or farm** Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		$ 0	$
8b. **Interest and dividends**	8b.		$ 0	$
8c. **Family support payments that you, a non-filing spouse, or a dependent regularly receive** Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		$ 0	$
8d. **Unemployment compensation**	8d.		$ 0	$
8e. **Social Security**	8e.		$ 0	$
8f. **Other government assistance that you regularly receive** Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: ____	8f.		$ 0	$
8g. **Pension or retirement income**	8g.		$ 0	$
8h. **Other monthly income.** Specify: ____	8h.	+	$ 0	+ $
9. **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		$ 0	$
10. **Calculate monthly income.** Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		$ 600	+ $ = $ 600

11. **State all other regular contributions to the expenses that you list in *Schedule J*.**
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in *Schedule J*.
Specify: ____ 11. + $ 0

12. **Add the amount in the last column of line 10 to the amount in line 11.** The result is the combined monthly income. Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information*, if it applies 12. $ 600
Combined monthly income

13. **Do you expect an increase or decrease within the year after you file this form?**
☐ No.
☒ Yes. Explain: New Job

Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number 17-40881
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:
  MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. **Is this a joint case?**
   - ☒ No. Go to line 2.
   - ☐ Yes. **Does Debtor 2 live in a separate household?**
     - ☐ No
     - ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2.*

2. **Do you have dependents?** ☐ No ☐ Yes. Fill out this information for each dependent..........................

   Do not list Debtor 1 and Debtor 2.

   Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes
		☐ No ☐ Yes

3. **Do your expenses include expenses of people other than yourself and your dependents?** ☐ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

		Your expenses
4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4.	$ 1,200
If not included in line 4:		
4a. Real estate taxes	4a.	$ 0
4b. Property, homeowner's, or renter's insurance	4b.	$ 0
4c. Home maintenance, repair, and upkeep expenses	4c.	$ 200
4d. Homeowner's association or condominium dues	4d.	$ 0

Debtor 1 Cantres LaNae Clark (First Name / Middle Name / Last Name) Case number (if known) 17-40881

			Your expenses
5.	**Additional mortgage payments for your residence**, such as home equity loans	5.	$
6.	**Utilities:**		
	6a. Electricity, heat, natural gas	6a.	$ 250
	6b. Water, sewer, garbage collection	6b.	$ 150
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$ 600
	6d. Other. Specify:	6d.	$ 0
7.	**Food and housekeeping supplies**	7.	$ 800
8.	**Childcare and children's education costs**	8.	$ 200
9.	**Clothing, laundry, and dry cleaning**	9.	$ 200
10.	**Personal care products and services**	10.	$ 100
11.	**Medical and dental expenses**	11.	$ 300
12.	**Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$ 500
13.	**Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$ 0
14.	**Charitable contributions and religious donations**	14.	$ 200
15.	**Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	$ 0
	15b. Health insurance	15b.	$ 0
	15c. Vehicle insurance	15c.	$ 400
	15d. Other insurance. Specify:	15d.	$ 0
16.	**Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	$ 0
17.	**Installment or lease payments:**		
	17a. Car payments for Vehicle 1	17a.	$ 423
	17b. Car payments for Vehicle 2	17b.	$ 840
	17c. Other. Specify:	17c.	$ 0
	17d. Other. Specify:	17d.	$ 0
18.	**Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form 106I).**	18.	$ 0
19.	**Other payments you make to support others who do not live with you.** Specify: Mother's Rent	19.	$ 240
20.	**Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I: Your Income.***		
	20a. Mortgages on other property	20a.	$ 0
	20b. Real estate taxes	20b.	$ 0
	20c. Property, homeowner's, or renter's insurance	20c.	$ 0
	20d. Maintenance, repair, and upkeep expenses	20d.	$ 0
	20e. Homeowner's association or condominium dues	20e.	$ 0

Debtor 1 Cantres LaNae Clark (First Name / Middle Name / Last Name) Case number (if known) 17-40881

21. **Other.** Specify: ______ 21. +$______

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21. 22a. $ 6,603

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. $______

22c. Add line 22a and 22b. The result is your monthly expenses. 22c. $ 6,603

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I.* 23a. $ 600

23b. Copy your monthly expenses from line 22c above. 23b. –$ 6,603

23c. Subtract your monthly expenses from your monthly income. The result is your *monthly net income*. 23c. $ 0

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1: Cantres LaNae Clark (First Name / Middle Name / Last Name)

Debtor 2 (Spouse, if filing): First Name / Middle Name / Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number (If known): 17-40881

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

______ MM / DD / YYYY

Official Form 106J-2

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. ***If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J.*** **Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.**

Part 1: Describe Your Household

1. **Do you and Debtor 1 maintain separate households?**
   - ☒ No. Do not complete this form.
   - ☐ Yes

2. **Do you have dependents?**
   - ☐ No
   - ☐ Yes. Fill out this information for each dependent..........................

   Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

   Do not state the dependents' names.

Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
______	______	☐ No ☐ Yes
______	______	☐ No ☐ Yes
______	______	☐ No ☐ Yes
______	______	☐ No ☐ Yes
______	______	☐ No ☐ Yes

3. **Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?**
   - ☐ No
   - ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

		Your expenses
4. **The rental or home ownership expenses for your residence.** Include first mortgage payments and any rent for the ground or lot.	4.	$______
If not included in line 4:		
4a. Real estate taxes	4a.	$______
4b. Property, homeowner's, or renter's insurance	4b.	$______
4c. Home maintenance, repair, and upkeep expenses	4c.	$______
4d. Homeowner's association or condominium dues	4d.	$______

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

		Your expenses
5. **Additional mortgage payments for your residence**, such as home equity loans	5.	$
6. **Utilities:**		
6a. Electricity, heat, natural gas	6a.	$
6b. Water, sewer, garbage collection	6b.	$
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	$
6d. Other. Specify:	6d.	$
7. **Food and housekeeping supplies**	7.	$
8. **Childcare and children's education costs**	8.	$
9. **Clothing, laundry, and dry cleaning**	9.	$
10. **Personal care products and services**	10.	$
11. **Medical and dental expenses**	11.	$
12. **Transportation.** Include gas, maintenance, bus or train fare. Do not include car payments.	12.	$
13. **Entertainment, clubs, recreation, newspapers, magazines, and books**	13.	$
14. **Charitable contributions and religious donations**	14.	$
15. **Insurance.** Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	$
15b. Health insurance	15b.	$
15c. Vehicle insurance	15c.	$
15d. Other insurance. Specify:	15d.	$
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	$
17. **Installment or lease payments:**		
17a. Car payments for Vehicle 1	17a.	$
17b. Car payments for Vehicle 2	17b.	$
17c. Other. Specify:	17c.	$
17d. Other. Specify:	17d.	$
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, *Schedule I, Your Income* (Official Form 106I).**	18.	$
19. **Other payments you make to support others who do not live with you.** Specify:	19.	$
20. **Other real property expenses not included in lines 4 or 5 of this form or on *Schedule I: Your Income.***		
20a. Mortgages on other property	20a.	$
20b. Real estate taxes	20b.	$
20c. Property, homeowner's, or renter's insurance	20c.	$
20d. Maintenance, repair, and upkeep expenses	20d.	$
20e. Homeowner's association or condominium dues	20e.	$

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

21. **Other.** Specify: ______________________ 21. +$__________

22. **Your monthly expenses.** Add lines 5 through 21.
The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2. 22. $__________

23. Line not used on this form.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☐ Yes. Explain here:

Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX (State)

Case number 17-40881
(If known)

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

- ☐ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ■ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☐ 3. The commitment period is 3 years.
- ■ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C–1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

1. **What is your marital and filing status?** Check one only.
   - ☐ **Not married.** Fill out Column A, lines 2-11.
   - ■ **Married.** Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write $0 in the space.

	Debtor 1	Debtor 2		*Column A* **Debtor 1**	*Column B* **Debtor 2 or non-filing spouse**
2. **Your gross wages, salary, tips, bonuses, overtime, and commissions** (before all payroll deductions).				$ 0	$ 0
3. **Alimony and maintenance payments.** Do not include payments from a spouse.				$ 0	$ 0
4. **All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.				$ 0	$ 0
5. **Net income from operating a business, profession, or farm**	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	$ 0	$ 7719			
Ordinary and necessary operating expenses	– $ 0	– $ 2,666			
Net monthly income from a business, profession, or farm	$ 0	$ 5053	Copy here→	$ 0	$ 5,053
6. **Net income from rental and other real property**	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	$	$			
Ordinary and necessary operating expenses	– $	– $			
Net monthly income from rental or other real property	$	$	Copy here→	$ 0	$ 0

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
7. **Interest, dividends, and royalties**	$ 0	$ 0
8. **Unemployment compensation**	$ 0	$ 0

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ↓

For you .... $______

For your spouse .... $______

	Column A	Column B
9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.	$ 0	$ 0
10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.		
______	$ 0	$ 0
______	$ 0	$ 0
Total amounts from separate pages, if any.	+ $ 0	+ $ 0
11. **Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	$ 0	+ $ 5053

= $ 5053
Total average monthly income

Part 2: Determine How to Measure Your Deductions from Income

12. **Copy your total average monthly income from line 11.** .... $ 5053

13. **Calculate the marital adjustment.** Check one:

- ☐ You are not married. Fill in 0 below.
- ☐ You are married and your spouse is filing with you. Fill in 0 below.
- ☒ You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

______ $ 0

______ $ 0

______ + $ 0

Total .... $ 0 Copy here ➔ − 0

14. **Your current monthly income.** Subtract the total in line 13 from line 12. $ 5053

15. **Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here ➔ .... $ 5053

Multiply line 15a by 12 (the number of months in a year). x 12

15b. The result is your current monthly income for the year for this part of the form. .... $ 60,636

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Case number (if known) 17-40881

16. **Calculate the median family income that applies to you.** Follow these steps:

16a. Fill in the state in which you live. TX

16b. Fill in the number of people in your household. 4

16c. Fill in the median family income for your state and size of household. $ 77,800
To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

17. **How do the lines compare?**

17a. ☐ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3).* **Go to Part 3.** Do NOT fill out *Calculation of Disposable Income* (Official Form 122C–2).

17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3).* **Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C–2).** On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)

18. **Copy your total average monthly income from line 11.** $ 5053

19. **Deduct the marital adjustment if it applies.** If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. – $ 0

19b. **Subtract line 19a from line 18.** $ 5053

20. **Calculate your current monthly income for the year.** Follow these steps:

20a. Copy line 19b. $ 5053

Multiply by 12 (the number of months in a year). x 12

20b. The result is your current monthly income for the year for this part of the form. $ 60,636

20c. Copy the median family income for your state and size of household from line 16c. $ 77,800

21. **How do the lines compare?**

☐ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years.* Go to Part 4.

☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years.* Go to Part 4.

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

x Cantres Clark
Signature of Debtor 1

x ______
Signature of Debtor 2

Date 5 16 2017
MM / DD / YYYY

Date ______
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C–2.

If you checked 17b, fill out Form 122C–2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX

Case number 17-40881
(If known)

☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C–1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. **The number of people used in determining your deductions from income**
Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. **4**

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. $1,509

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1 Cantres LaNae Clark — First Name Middle Name Last Name — Case number (if known) 17-40881

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person $ 54

7b. Number of people who are under 65 X 4

7c. Subtotal. Multiply line 7a by line 7b. $ 216 Copy here➔ $ 216

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person $ 0

7e. Number of people who are 65 or older X ____

7f. Subtotal. Multiply line 7d by line 7e. $____ Copy here➔ + $ 0

7g. **Total.** Add lines 7c and 7f. $ 216 Copy here➔ $ 216

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- **Housing and utilities – Insurance and operating expenses**
- **Housing and utilities – Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. $ 693

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. $ 1806

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
	$
	$
	☐ $

9b. Total average monthly payment $____ Copy here➔ – $ 0 Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (*mortgage or rent expense*). If this number is less than $0, enter $0. $ 1806 Copy here➔ $ 1806

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** $ 0

Explain why: ____

Debtor 1 Cantres LaNae Clark (First Name / Middle Name / Last Name) Case number (if known) 17-40881

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- ☐ 0. Go to line 14.
- ☐ 1. Go to line 12.
- ☒ 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. $500

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1 **Describe Vehicle 1:** Jaguar XJ 2011

13a. Ownership or leasing costs using IRS Local Standard $471

13b. Average monthly payment for all debts secured by Vehicle 1.
Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	**Average monthly payment**
EECU	$423
	+ $
Total average monthly payment	$423

Copy here → − $423 Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense
Subtract line 13b from line 13a. If this number is less than $0, enter $0. .... $48 **Copy net Vehicle 1 expense here** → $48

Vehicle 2 **Describe Vehicle 2:** ____________________

13d. Ownership or leasing costs using IRS Local Standard .... $______

13e. Average monthly payment for all debts secured by Vehicle 2.
Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	**Average monthly payment**
	$
	+ $
Total average monthly payment	$

Copy here → − $______ Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense
Subtract line 13e from 13d. If this number is less than $0, enter $0.................. $______ **Copy net Vehicle 2 expense here** → $0

14. **Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.** $0

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*. $0

Debtor 1 Cantres LaNae Clark (First Name / Middle Name / Last Name) Case number (if known) 17-40881

Other Necessary □xpenses — In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. □owever, if you expect to receive a tax refund, you must divide the expected refund by 1□ and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. $ 0

17. **Involuntary deductions:** The total monthly payroll deductions that your □ob requires, such as retirement contributions, union dues, and uniform costs.
Do not include amounts that are not required by your □ob, such as voluntary □01(k) contributions or payroll savings. $ 0

18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse□s term life insurance.
Do not include premiums for life insurance on your dependents, for a non-filing spouse□s life insurance, or for any form of life insurance other than term. $ 0

19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. $ 0
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.

□0. **□ducation:** The total monthly amount that you pay for education that is either required: $ 0
- as a condition for your □ob, or
- for your physically or mentally challenged dependent child if no public education is available for similar services.

□1. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. $ 0

□□ **□dditional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. $ 0
□ayments for health insurance or health savings accounts should be listed only in line □5.

□3. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. + $ 0
Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 1□□C-1, or any amount you previously deducted.

□□ **□dd all of the expenses allowed under the IRS expense allowances.** Add lines 6 through □3. $ 4772

□dditional □xpense Deductions — These are additional deductions allowed by the Means Test.
Note: Do not include any expense allowances listed in lines 6-□□

□5. **□ealth insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

□ealth insurance	$
Disability insurance	$
□ealth savings account □	$
Total	$

Copy total here ➔ $ 0

Do you actually spend this total amount□
- ☐ No. □ow much do you actually spend□ $
- ☐ Yes

□6. **Continuing contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified A□LE program. □6 U.S.C. □5□9A(b). $ 0

□7. **□rotection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family □iolence □revention and Services Act or other federal laws that apply. $ 0
□y law, the court must keep the nature of these expenses confidential.

Debtor 1 Cantres LaNae Clark (First Name, Middle Name, Last Name) Case number (if known) 17-40881

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. $0

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than $160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. $0

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. $0

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4). + $200

Do not include any amount more than 15% of your gross monthly income.

32. **Add all of the additional expense deductions.** $200

Add lines 25 through 31.

Deductions for Debt Payment

33. **For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

	Average monthly payment
Mortgages on your home	
33a. Copy line 9b here ➔	$0
Loans on your first two vehicles	
33b. Copy line 13b here. ➔	$423
33c. Copy line 13e here. ➔	$0

33d. List other secured debts:

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
		☐ No ☐ Yes	$
		☐ No ☐ Yes	$
		☐ No ☐ Yes	+ $

33e. Total average monthly payment. Add lines 33a through 33d. $423 Copy total here ➔ $423

Debtor 1 Cantres LaNae Clark — First Name / Middle Name / Last Name — Case number (if known) 17-40881

3□ □re any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents□

■ No. □o to line 35.
□ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount		□onthly cure amount
		$	□60 □	$
		$	□60 □	$
		$	□60 □ +	$

Total $ Copy total here➔ $

35. **Do you owe any priority claims—such as a priority tax, child support, or alimony— that are past due as of the filing date of your bankruptcy case□** 11 U.S.C. □507.

■ No. □o to line 36.
□ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims. $ □60 $

36. **□ro□ected monthly Chapter 13 plan payment** $ 2000

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). x 7.4%

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk□s office.

Average monthly administrative expense $ 148 Copy total here➔ $ 148

37. **□dd all of the deductions for debt payment.** Add lines 33e through 36. $ 571

Total Deductions from Income

38. **□dd all of the allowed deductions.**

Copy line □□, *All of the expenses allowed under IRS expense allowances* $ 4772

Copy line 3□, *All of the additional expense deductions* $ 200

Copy line 37, *All of the deductions for debt payment* □$ 571

Total deductions $ 5543 Copy total here ➔ $ 5543

Debtor 1 Cantres LaNae Clark (First Name, Middle Name, Last Name) Case number (if known) 17-40881

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)

39. **Copy your total current monthly income from line 1□ of Form 122C-1,** ***Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period.*** $5053

□0. **Fill in any reasonably necessary income you receive for support for dependent children.** The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in □art I of Form 1□□C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. $0

□1. **Fill in all qualified retirement deductions.** The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. □5□1(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. □36□(b)(19). $0

□□ **Total of all deductions allowed under 11 U.S.C. □□□□(b)(2)(□).** Copy line 38 here → $0

□3. **Deduction for special circumstances.** If special circumstances □stify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances	□mount of expense
	$ 0
	$ 0
	+ $ 0
Total	$ 0

Copy here → □$ 0

□□ **Total ad□stments.** Add lines □0 through □3. $ 0 Copy here → − $ 0

□5. **Calculate your monthly disposable income under □1325(b)(2).** Subtract line □□ from line 39. $5053

Part 3: Change in Income or Expenses

□6. **Change in income or expenses.** If the income in Form 1□□C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 1□□C-1 in the first column, enter line □ in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease□	□mount of change
☐ 1□□C–1 ☐ 1□□C–□				☐ Increase ☐ Decrease	$ 0
☐ 1□□C–1 ☐ 1□□C–□				☐ Increase ☐ Decrease	$ 0
☐ 1□□C–1 ☐ 1□□C–□				☐ Increase ☐ Decrease	$ 0
☐ 1□□C–1 ☐ 1□□C–□				☐ Increase ☐ Decrease	$ 0

Debtor 1 Cantres LaNae Clark Case number (if known) 17-40881
First Name Middle Name Last Name

Part 4: **Sign Below**

□y signing here, under penalty of per□ury you declare that the information on this statement and in any attachments is true and correct.

✗ Cantres Clark ✗

Signature of Debtor 1 Signature of Debtor □

Date 5 16 2017 Date
MM □ DD □YYYY MM □ DD □YYYY

Fill in this information to identify your case:

Debtor 1 Cantres LaNae Clark
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of TX

Case number 17-40881
(If known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. **What is your current marital status?**

■ Married
☐ Not married

2. **During the last 3 years, have you lived anywhere other than where you live now?**

■ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		☐ Same as Debtor 1	☐ Same as Debtor 1
Number Street	From ____ To ____	Number Street	From ____ To ____
City State ZIP Code		City State ZIP Code	
		☐ Same as Debtor 1	☐ Same as Debtor 1
Number Street	From ____ To ____	Number Street	From ____ To ____
City State ZIP Code		City State ZIP Code	

3. **Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (*Community property states and territories* include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No
■ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1 Cantres LaVae Clark (First Name / Middle Name / Last Name) Case number (if known) 17-40881

4. **Did you have any income from employment or from operating a business during this year or the two previous calendar years?**
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No
■ Yes. Fill in the details.

	Debtor 1 Sources of income (Check all that apply.)	Debtor 1 Gross income (before deductions and exclusions)	Debtor 2 Sources of income (Check all that apply.)	Debtor 2 Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips ■ Operating a business	$ 1,800	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$
For last calendar year: (January 1 to December 31, ____ YYYY)	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$
For the calendar year before that: (January 1 to December 31, ____ YYYY)	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$	☐ Wages, commissions, bonuses, tips ☐ Operating a business	$

5. **Did you receive any other income during this year or the two previous calendar years?**
Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

■ No
☐ Yes. Fill in the details.

	Debtor 1 Sources of income (Describe below.)	Debtor 1 Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income (Describe below.)	Debtor 2 Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		$		$
		$		$
		$		$
For last calendar year: (January 1 to December 31, ____ YYYY)		$		$
		$		$
		$		$
For the calendar year before that: (January 1 to December 31, ____ YYYY)		$		$
		$		$
		$		$

Debtor 1 Cantres LaNae Clark — Case number (if known) 17-40881
First Name Middle Name Last Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $6,425* or more?

  - ■ No. Go to line 7.
  - ☐ Yes. List below each creditor to whom you paid a total of $6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of $600 or more?

  - ☐ No. Go to line 7.
  - ☐ Yes. List below each creditor to whom you paid a total of $600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name Number Street City State ZIP Code		$	$	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other
Creditor's Name Number Street City State ZIP Code		$	$	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other
Creditor's Name Number Street City State ZIP Code		$	$	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other

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7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ■ No
- ☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name Number Street City State ZIP Code		$	$	
Insider's Name Number Street City State ZIP Code		$	$	

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**
Include payments on debts guaranteed or cosigned by an insider.

- ■ No
- ☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name Number Street City State ZIP Code		$	$	
Insider's Name Number Street City State ZIP Code		$	$	

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- [x] No
- [ ] Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title ______ Case number ______		Court Name Number Street City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded
Case title ______ Case number ______		Court Name Number Street City State ZIP Code	☐ Pending ☐ On appeal ☐ Concluded

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
Check all that apply and fill in the details below.

- [ ] No. Go to line 11.
- [x] Yes. Fill in the information below.

	Describe the property	Date	Value of the property
EECU (Creditor's Name) PO Box 1777 (Number Street) Fort Worth TX 76101 City State ZIP Code	Car **Explain what happened** ☒ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized, or levied.	4-15-17	$ 16,500
Creditor's Name Number Street City State ZIP Code	**Explain what happened** ☐ Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized, or levied.	______	$______

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11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- [x] No
- [ ] Yes. Fill in the details.

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name Number Street City State ZIP Code	Last 4 digits of account number: XXXX–__ __ __ __		$

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

- [x] No
- [ ] Yes

Part 5: List Certain Gifts and Contributions

13. **Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than $600 per person?**

- [x] No
- [ ] Yes. Fill in the details for each gift.

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you			$ $

Gifts with a total value of more than $600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you			$ $

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14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than $600 to any charity?

- [x] No
- [ ] Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than $600	Describe what you contributed	Date you contributed	Value
Charity's Name			$
Number Street			$
City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- [x] No
- [ ] Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property.*	Date of your loss	Value of property lost
			$

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?
Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- [x] No
- [ ] Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			$
Number Street			$
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

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	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You		______ ______	$______ $______

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**
Do not include any payment or transfer that you listed on line 16.

- [x] No
- [ ] Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code		______ ______	$______ $______

18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).
Do not include gifts and transfers that you have already listed on this statement.

- [x] No
- [ ] Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you ______			______
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you ______			______

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19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called *asset-protection devices.*)

- [x] No
- [ ] Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust		

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. **Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- [x] **No**
- [ ] **Yes. Fill in the details.**

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX–____	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other____		$
Name of Financial Institution Number Street City State ZIP Code	XXXX–____	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage ☐ Other____		$

21. **Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

- [x] **No**
- [ ] **Yes. Fill in the details.**

	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code		☐ No ☐ Yes

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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- [x] No
- [ ] Yes. Fill in the details.

	Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility Number Street City State ZIP Code	Name Number Street City State ZIP Code		☐ No ☐ Yes

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- [x] No
- [ ] Yes. Fill in the details.

	Where is the property?	Describe the property	Value
Owner's Name Number Street City State ZIP Code	Number Street City State ZIP Code		$

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- [x] No
- [ ] Yes. Fill in the details.

	Governmental unit	Environmental law, if you know it	Date of notice
Name of site Number Street City State ZIP Code	Governmental unit Number Street City State ZIP Code		

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First Name Middle Name Last Name

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25. Have you notified any governmental unit of any release of hazardous material?

- ■ No
- ☐ Yes. Fill in the details.

	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code			

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ■ No
- ☐ Yes. Fill in the details.

	Court or agency	Nature of the case	Status of the case
Case title	Court Name		☐ Pending
	Number Street		☐ On appeal
Case number	City State ZIP Code		☐ Concluded

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☐ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Primerica Business Name	Insurance	EIN: __ __ - __ __ __ __ __ __ __
5900 South Lake Forest Number Street	Name of accountant or bookkeeper	Dates business existed
Mckinney TX 75070 City State ZIP Code		From 08-2017 To current

	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Cornerstone Merchant Services Business Name	Merchant Services	EIN: 20-0599521
8200 Sonnet Number Street	Name of accountant or bookkeeper	Dates business existed
Mckinney TX 75071 City State ZIP Code		From 1-1-13 To 1-1-17

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Business Name / Address	Describe the nature of the business / Name of accountant or bookkeeper	Employer Identification number
Business Name Number Street City State ZIP Code	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. EIN: __ __ - __ __ __ __ __ __ __ Dates business existed From ____ To ____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- [x] No
- [ ] Yes. Fill in the details below.

	Date issued
Name Number Street City State ZIP Code	MM / DD / YYYY

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

✘ Cantres Clark
Signature of Debtor 1

Date 5-16-17

✘ ____________
Signature of Debtor 2

Date ____________

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- [x] No
- [ ] Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- [x] No
- [ ] Yes. Name of person____________. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).